

| POSITION                  | INITIALS      | ID NO.      | DATE            |
|---------------------------|---------------|-------------|-----------------|
| FEE DETERMINATION         | <i>Daniel</i> |             | <i>28-08-01</i> |
| O.I.P.E. CLASSIFIER       |               | <i>10</i>   | <i>8-15-01</i>  |
| FORMALITY REVIEW          | <i>ck</i>     | <i>1109</i> | <i>9-11-01</i>  |
| RESPONSE FORMALITY REVIEW |               |             |                 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

| Claim             | Date           |
|-------------------|----------------|
| Final<br>Original |                |
| 1                 | <i>11/8/01</i> |
| 2                 | <i>12/6/01</i> |
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| Claim             | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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